MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

56843D

PILING DATE_

APPLICANT(S)

	7	CLAIM														
	AS FILED IND. DEP.		1"41	AFTER CAMENDMENT			AFTER 2 MANIENDMENT			1	as filed		AFTER CAMEROMERT		AFT	
1	INU.	DEP.	_	- D	EP.	IND,	DEP.	1	Ŀ	UN	D.	DEP.	IND.	DEP.	MAPE	-
2	 	┨───						1	51		-		410.	Det.	IND.	4
3	 	 						1	52		_	<u> </u>		 		4
4 ·	· ·	 	 						53				· · ·	 	·	4
5		-							54							4
6	-	1	1	╼╂╼╼┼				i i	55							1
7		·	1	-11	-				56							ł
8 .			1	1-1					57							ł
6				7-+	<u> </u>				58 59	-	-					ł
10				7					- 29		- -		*,	•		t
11				1				ł	60 61		- -					ŀ
12								· . }	62	 -						r
13	<u> </u>							. I	63	- 						r
4				1				ľ	64	.	- -					
5			ļ	1	`			ľ	65	1						L
7						-1			66		7-		 			L
8				 					67					 		
9				-		` :			68.	1	$oldsymbol{oldsymbol{\Box}}$					_
0			-	1				Į.	69							_
1				1-		· · · · · ·		P	70	 	-					-
2					. 1			-	71 72	 						÷
3								 	73	1	-					_
4					\Box			. I-	74	1	- -				$-\Box$	Ξ
5 6				 				· [75		1				}	_
7				ļ	_ _ j.				·76		1			 -	 -	_
8				 	-1-				77	, ,						_
9				 			 j.	· _	78 79		1_					-
0				1		 -		· -	79 80	 	 -	_		\Box		_
								 -	81		- 	<u></u> -				
2.								<u> </u>	82		+-	 -				_
3								. 1	83		1-	-		[-		_
<u>4</u> 5				 	_ _				84		1				——	_
6									85			_ -		 -	 -	_
7					-			 _	86							
3								 	87		-					:
9.					-1-				88 89.		 					
2									90 90		 	-	-			_
\Box		<u>.</u>						-	91		1			 -		_
2		J.							92		1			 -		_
-		J.							93						 -	-
; 				-	- -				94							-
5	 -	<u>}</u> -							95							_
					-ŀ-			·	9.6						-	
	•				- -	 -			97			_ _				_
					-1-	 -			98		 	_ _	:			
							 		99 100			- -	_			
UND.		4	1	4	7		1		ALIND.		-	_		1		1
DEP.		<u>e</u> [14	4=			a	-		J	4=			*		¥
AL M3	·		15						OTAL ADICS			W				
	•						-	تنسا					HT of COMM	CUSAID		4